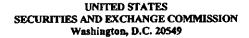
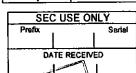
FORM D



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR FORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30, 2008
Estimated average burden
hours per response 16.00



UMITORIA LIMITED OFFERING EXEM	
Name of Offering (check if this is an amendment and name has changed, and indicate change.) SeaCrest Emerging Markets Debt Partners, L.P Limited Partnership Interests	(Consolid
Filing Under (Check box(es) that apply):	
A. BASIC IDENTIFICATION DATA	[0]
1. Enter the information requested about the issuer	1 Promon
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	Vi-
SeaCrest Emerging Markets Debt Partners, L.P.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
c/o SeaCrest Emerging Markets GP, LLC, 38 Bramble Lane, Riverside, CT 06878	203-637-2389
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
The Partnership will operate as a private investment partnership.	PROCESSED
Type of Business Organization corporation business trust Imited partnership, already formed other (partnership, to be formed	olease specify): NOV 2 7 2006
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	mated THOMSON

GENERAL INSTRUCTIONS

Rederal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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1 of 9

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner Executive Officer Director Managing Partner SeaCrest Emerging Markets GP, LLC Full Name (Last name first, if individual) 38 Bramble Lane, Riverside, CT 06878 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner SeaCrest Investment Management, LLC Full Name (Last name first, if individual) 38 Bramble Lane, Riverside, CT 06878 Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter Managing Partner Rajesh K. Gupta Full Name (Last name first, if individual) c/o SeaCrest Emerging Markets GP, LLC, 38 Bramble Lane, Riverside, CT 06878 Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Director General and/or ☐ Beneficial Owner Check Box(es) that Apply: Promoter Managing Partner Richard R. Sanchez Full Name (Last name first, if individual) c/o SeaCrest Emerging Markets GP, LLC, 38 Bramble Lane, Riverside, CT 06878 Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer General and/or Check Box(es) that Apply: Promoter Director Managing Partner Ronald R. Lenihan Full Name (Last name first, if individual) c/o SeaCrest Emerging Markets GP, LLC, 38 Bramble Lane, Riverside, CT 06878 Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Beneficial Owner Executive Officer ☐ Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	B. INFORMATION ABOUT OFFERING							
_	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							
1.	Answer also in Appendix, Column 2, if filing under ULOE.		×					
1	1.0							
2.	what is the minimum investment that will be accepted from any marviage.	\$ 250,00 Yes	No					
3.	Does the offering permit joint ownership of a single unit?	\boxtimes						
4.								
Ful	l Name (Last name first, if individual)							
N/A	siness or Residence Address (Number and Street, City, State, Zip Code)							
Вu	siness of Residence Address (Number and Silver, City, State, 219 Code)							
Na	me of Associated Broker or Dealer							
Sta	ites in Which Person Listed Has Solicited or Intends to Solicit Purchasers							
	(Check "All States" or check individual States)	. 🔲 Al	States					
	AL AK AZ AR CA CO CT DE DC FL GA IL IN IA KS KY LA ME MD MA MI MN MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI	HI MS OR WY	MO PA PR					
Fu	ll Name (Last name first, if individual)							
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)							
Na	me of Associated Broker or Dealer							
Sta	ates in Which Person Listed Has Solicited or Intends to Solicit Purchasers		,					
	(Check "All States" or check individual States)	Al	1 States					
	AL AK AZ AR CA CO CT DE DC FL GA IL IN IA KS KY LA ME MD MA MI MN MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI	MS OR WY	MO PA PR					
Fu	ll Name (Last name first, if individual)							
Bu	isiness or Residence Address (Number and Street, City, State, Zip Code)		, ,, 					
N	ame of Associated Broker or Dealer							
St	ates in Which Person Listed Has Solicited or Intends to Solicit Purchasers							
	(Check "All States" or check individual States)	A	ll States					
	(Check "All States" or check individual States) AL AK AZ AR CA CO CT DE DC FL GA IL IN IA KS KY LA ME MD MA MI MN MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI							

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Sold Offering Price Type of Security Debt \$_____\$ Equity Common Preferred Convertible Securities (including warrants) 1,075,000.00)**s**_______**s**_____ Other (Specify Total _______ \$ 200,000,000.00 \$ Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number Investors of Purchases Accredited Investors 0.00 0.00 Non-accredited Investors 0.00 Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Dollar Amount Security Sold Type of Offering 0.00 Rule 505 N/A \$ 0.00 N/A \$ Regulation A Rule 504______ 0.00 N/A S N/A \$ 0.00 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs 冈 10,000.00 図 20,000.00 Legal Fees Accounting Fees Ø 5,000.00 Engineering Fees \$ Sales Commissions (specify finders' fees separately) П

Total

図

5,000.00

40,000.00

Other Expenses (identify) Blue Sky filing fees

	and total expenses furnished in response to Par	e offering price given in response to Part C—Qu rt C—Question 4.a. This difference is the "adjust	ted gross	\$_199,960,000.00	
5.	each of the purposes shown. If the amount f	iss proceed to the issuer used or proposed to be for any purpose is not known, furnish an estim- otal of the payments listed must equal the adjust o Part C — Question 4.b above.	nate and		
			Payments to Officers, Directors, & Affiliates		
	Salaries and fees	•••••••••••••••••••••••••••••••••••••••	s	_ 🗆 🗆	
	Purchase of real estate		ss	_ 🗆 \$	
	Purchase, rental or leasing and installation of and equipment	of machinery			
	Construction or leasing of plant buildings a	ss			
	Acquisition of other businesses (including a offering that may be used in exchange for the issuer pursuant to a merger)			_ 🗆 \$	
	Repayment of indebtedness			נ"] \$	
	Working capital			⊠ \$199,900,00	
	Other (specify): Start-up expenses		\$	⊠ \$60,00	
			<u>.</u>		
			—	s	
	Column Totals		[7] s	_ ⊠ \$199,960,00	
	Total Payments Listed (column totals added	i)		99,960,000	
ar ar		D. FEDERAL SIGNATURE:		经济运行 1946年	
sig	nature constitutes an undertaking by the issuer	by the undersigned duly authorized person. If the to furnish to the U.S. Securities and Exchange on-accredited investor pursuant to paragraph (but to be a security of the content of the	Commission, upon writte	ule 505, the following on request of its staff,	
Iss	uer (Print or Type)	Signature	Date		
	Crest Emerging Markets Debt Partners, L.P.	(sell of	November 15, 2	006	
	ne of Signer (Print or Type) SeaCrest Emerging Markets GP, LLC	Title of Signer (Frint or Type) Son 4(4) By: Lichard R. Lenihan, Managing Member	of SecCreet Emerging Mark	rate GP 11C	
27.	Secretary Market Office	Dy: Learning, Wallaging Welling	of Seacrest Editarging Wark	eis Or, LLC	

-- ATTENTION ---

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE					
1.	Is any party described in 17 CFR 230.2 provisions of such rule?	262 presently subject to any of the disqualification	Yes	No			
		See Appendix, Column 5, for state response.					
2.	The undersigned issuer hereby undertake D (17 CFR 239.500) at such times as r	es to furnish to any state administrator of any state in which this notice is fi equired by state law. N/A	led a not	ice on Form			
3.	3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by issuer to offerees.						
4.	limited Offering Exemption (ULOE) of	the issuer is familiar with the conditions that must be satisfied to be ent f the state in which this notice is filed and understands that the issuer claim tablishing that these conditions have been satisfied.					
	uer has read this notification and knows the thorized person.	e contents to be true and has duly caused this notice to be signed on its beha	lf by the	undersigned			
Ì	Print or Type)	Signature Date					
	t Emerging Markets Debt Partners, L.P.	Title (Print or Type)	6				
	Print or Type) t Emerging Markets GP, LLC	By Richard R. Lenihan, Managing Member of ScaCrest Emerging Mark	ets GP, LI	.c			

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX									
l	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Limited Partner- ship Interests \$200,000,000	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	N/A	n/a
AL								×	×
AK								X	×
AZ								×	×
AR								×	×
CA								×	×
со								X	X
СТ		X	x	4	\$375,000	0	\$0.00	×	X
DE								×	X
DC								×	×
FL								×	X
GA								×	×
ні								×	X
ID								×	X
IL.								X	X
IN			•					×	×
IA								X	×
KS								×	X
KY								×	×
LA								×	×
ME								×	×
MD								×	×
MA								×	×
MI								×	X
MN								×	X
MS								×	X

			•	APPI	ENDIX									
1	Intend to sell to non-accredite investors in Stat (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of security and aggregate offering price offered in state Type of investor and offered in State		Type of security and aggregate offering price offered in state Type of investor and amount purchased in State		ype of security and aggregate offering price offered in state Type of investor a amount purchased in		Type of investor and amount purchased in State				
State	Yes	No	Limited Partner- ship Interests \$200,000,000	Number of Accredited Investors	Number of Number of Accredited Non-Accredited				Ņ/A					
мо	-							×	×					
МТ			-					×	×					
NE		<u> </u>						×	×					
NV								×	×					
NH								×	×					
NJ								×	×					
NM								X	X					
NY		x	x	1	\$200,000	0	\$0.00	×	×					
NC								×	×					
ND								×	×					
он								X	×					
ок								×	×					
OR								×	×					
PA								X	×					
RI							.	×	×					
sc								X	X					
SD								X	X					
TN								X	×					
TX								X	×					
UT								×	×					
VT								×	×					
VA								X	×					
WA			_					×	X					
wv								×	×					
	1	 		1	1	T								

_				APPE	NDIX				
1	Intend to sell to non-accredited		3 Type of security and aggregate offering price			4 investor and		under St (if yes explan	lification ate ULOE , attach action of
		rs in State 3-Item 1)	offered in state (Part C-Item 1)	amount purchased in State (Part C-Item 2)				waiver granted) (Part E-Item 1)	
State	Yes	No	Limited Partner- ship Interests \$200,000,000	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	N/A	n/à
WY					,			×	×
PR	-							×	×